			i					_ • ' { _		7/- 7	7 Y	70	7/		
		an ication	CEE DET	FDM	INATIO	N RECO	RD		App	cetion of	T Do	cket Num	7/	<b>/</b> ·	
	PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTI		OR	OTHER SMALL (			
TOTAL CLAIMS			70.					RATE FEE						Ε	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	EE 3	55.00	OR	BASIC FEE	· 710.	99	
TOTAL CHARGEABLE CLAIMS			70) minus 20=		•			X\$ 9=			OR	X\$18=		Ц	
NDEPENDENT CLAIMS			77 minus 3 =		•			X40=			OR	X80=			
MUL	TIPLE DEPEND	ENT CLAIM PR	ESENT					+135=			OR +270=		'		
H 10	ne difference is	n column 1 is is	ess than zero	o, ente	r "O" in o	olumn 2		TOTAL	†		OR	TOTAL	1	72	
111	14/15 CL						OTHER								
1 7	705	AIMS AS A (Column 1)		(Colu	mn 2)	(Column 3)		SMAL			OR I I	SMALL		DI-	
Y Y		CLAIMS REMAINING AFTER	NUA PREV		REST RBER PRESENT ROUSLY EXTRA			RATE	_	ADDI- IONAL FEE		RATE	TIO	NAL EE	
AMENDMENT	Total	AMENDMENT	Minus	•• —	30	3		X\$ 9=		7	OR	X\$18=			
	Independent	• 3	Minus	•••	3_	-		X40=	1	1	OR	X80=			
3	FIRST PRESE	VITATION OF MIL	JLTIPLE DEP	ENDEN	IT CLAIM		J	+135	7	1	OR	+270=		$\prod$	
	7/2/41							101		<del>-                                    </del>	OR	YOYAL		<del>/                                    </del>	
•	2/3/6 (Column 1) (Column 2) (Column 3)								EE <b>L</b>			ADDIT. FEE			
	क्षा <u>करते हैं</u>	(Column 1) CLAIMS	SE TERRET	RIG	HEST	PRESENT EXTRA			T	ADDI-		RATE	A	DDI-	
NT B		REMAINING AFTER AMENDMENT		PRE	IMBER VIOUSLY ID FOR			RATE		TIONAL FEE			TIONAL FEE		
	Total	· /7	Minus	••	20	= /		X\$ 9	-		OR	X\$18=	上		
AMENDMENT	Independent	• 3	Minus	***	3	<u> - /</u>	4	X40:	3		ОЯ	X80=	<u> </u>	/	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDE	IT CLAIM [_]			+135	_		OR	+270=		<u>/</u>	
								ADDIT. F				ADDIT. FE			
(Column 1) (Column 2) (Column 3)															
TC		CLAIMS REMAINING AFTER		NL PRE	SHEST RABER VIOUSLY ID FOR	PRESENT EXTRA		. RATI	E	ADDI- TIONAL FEE		RATE	TU	DDI- ONAL FEE	
AMENDMENT C	Total	AMENDMENT	Minus		ID FOR	-	7	X\$ 9	_†	1 1-1-	1 <sub>OR</sub>	X\$18=	- T		
EN	Independent	<del> </del> -	Minus	•••		•	]	X40	}		OF	ven	十		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										1		1		
	If the entry in column 1 is less than the entry in column 2, write "O" in column 3.							+135	YAL		OR	TOT	L		
	If the "Highest Na	amber Previously I	PENS FOR UNITH	3 3 M	C 10 1500 U	201 20, million	20.°	ADDIT.	FEE		JOF	ADDIT. FE		<del>-</del>	
	The "Highest Nu The "Highest Nu	mber Proviousiv. P	ato For (lower	r Indepe	MICHAEL IN CO.	he highest nur	rber	found in th	ne expf	ropriate t	oox in (	polumn 1.			
		BES	THAM	it (4)	365	JUPY-		Peterd and 1	rader	serk Office.	U.S. D	EPARTMENT	OF CC	MMER	